

PRINTER RUSH

(PTO ASSISTANCE)

Application : 10/738386

Examiner : Hale

GAU : 3765

From : PAP

Location : IDC FMF FDC

Date : 8/10/05

Tracking #: EPM 10/738386 Week Date: 5/23/05

| DOC CODE | DOC DATE | MISCELLANEOUS |
|--|----------------|--|
| <input type="checkbox"/> 1449 | | <input type="checkbox"/> Continuing Data |
| <input type="checkbox"/> IDS | | <input type="checkbox"/> Foreign Priority |
| <input checked="" type="checkbox"/> CLM | <u>4/15/05</u> | <input type="checkbox"/> Document Legibility |
| <input checked="" type="checkbox"/> IIFW | <u>5/13/05</u> | <input type="checkbox"/> Fees |
| <input type="checkbox"/> SRFW | | <input type="checkbox"/> Other |
| <input type="checkbox"/> DRW | | |
| <input type="checkbox"/> OATH | | |
| <input type="checkbox"/> 312 | | |
| <input type="checkbox"/> SPEC | | |

[RUSH] MESSAGE: Renumbered claim 4 (original claim 14)
depends on cancelled original claim 3.

thank you

[XRUSH] RESPONSE: _____

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04